Labor Organization Officer and Employee Report

U.S. Department of Labor

Employment Standards Admir ation Office of Labor-Management Jards





This report is mandatory under P.L. 86-257, as amended. Fallure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved – OMB No. 1215-0188 Expires 07-31-2004

. Name and address of person filing		2. Name and address of lat	bor organization		
Bruce Raynor, Secretary Treasurer UNITE General Office 275 Seventh Avenue, 11th Floor New York, NY 10001	/President				
Position in labor organization	4. Date fiscal year	ended	5. File number (if ass	igned)	
	12/31/2001	2/31/2001		None 41955	
inter appropriate data below if, during the past fi erests (except as specified in the exclusions set	scal year, you or you			any of the following in-	
 Held an interest in, engaged in transactions (employer whose employees your organization) 			er economic benefit of	monetary value from an	
			5 Seventh Avenue, w York, NY 10001	11th Floor	
. Nature of Interest, Transaction or Income					
Bember of the Board of Directors of Bember of Board of Bember of Board of Bember of Bemb	nic benefit with mone with the business of a	lary value from a business n employer whose employee	(1) a substantial part of	represents or is actively	
organization or with a trust in which your labor or		d.			
Name of business		Address of business			
Amalgamated Bank Of New York 15 Union Square New York, NY 10003					
Business deals with—		10. If 9B or 9C is checked	and the same of th	name	
☐ A. Labor Organization ☐ B. Trust	C. Employer				
Nature and approximate dollar value of such-deal	inos				
50 Class A/Voting Shares and 50 A	remco/Preffered	B Shares valued at \$0	282.00 per share		
Nature of interest held or income received					
\$991.02				S Rec'd	
				((007292003))	
				Que most	
				(48 DA)	
Received from any employer (other than an early payment of money or other thing of value	employer covered und	er parts A and B above) or fr	rom any labor relations of	onsultant to an employer	
	consultant	14. Nature of payment .			
None		None			
		ATTACH ADDITIONAL SH		in Altinoscopia final di	
5. Signature and verification—The undersigned of the attachments incorporated therein or referre correct and complete.	declares, under the ap d to in this report, has	opticable penalties of the law is been examined by him and	, that all of the information dis, to the best of his kr	on in this report, including lowledge and belief, true,	
oned / Mille Mary	at New York,	NY		on10/22/03	
1	City		State	Date	